

COPD

Nursing Problem Worksheet

Name: Abbey Fine

Anticipated Patient Problem and Goals	Relevant Assessments (Prewrite) What assessments pertain to your patient's problem? Include frequencies	Multidisciplinary Team Intervention (Prewrite) What will you do if your assessment is abnormal?
<p>* Problem: <u>Impaired Gas Exchange</u></p> <p>Reasoning: low SpO₂, restlessness, Confusion, <u>diminished/absent lung sounds</u></p> <p>Goal: Pt. will maintain adequate SpO₂ levels (>90%) by the end of my TOC.</p> <p>Goal: Pt. will verbalize early signs of hypoxia (dyspnea, anxiety) by the end of my TOC.</p>	<p>Assess RR, depth, rhythm & effort, use of accessory muscles q4hr.</p> <p>Auscultate lung sounds to identify any adventitious sounds like rales, wheezes, rhonchi, stridor q4hr</p> <p>Monitor SpO₂ continuously or q4hr</p> <p>Assess patient use of incentive spirometer and ask about frequency of use q4hr.</p> <p>Assess LOC and mental status by asking questions (look for restlessness, confusion, or drowsiness) q4hr.</p>	<p>Reposition patient, <u>notify provider</u> & signs of respiratory distress (put pt. in high-fowlers or tripod)</p> <p>Administer prescribed oxygen therapy, ensure at the right flow rate, educate importance of oxygen therapy, <u>report adventitious lung sounds</u></p> <p>Educate pt. on pursed-lip deep breathing, report any significant changes</p> <p>Educate patient on purpose of IS device in prevention of pneumonia and keeping alveoli open. Correct any misuse (sucking).</p> <p>Notify provider, assess any administered oxygen is at the flow rate properly ordered, ensure oxygen device is worn properly, possibly prepare for BiPAP or other non-surgical/non-invasive procedures.</p>

Anticipated Patient Problem and Goals	Relevant Assessments (Prewrite) What assessments pertain to your patient's problem? Include frequencies	Multidisciplinary Team Intervention (Prewrite) What will you do if your assessment is abnormal?
<p>Problem: <u>Activity Intolerance</u></p> <p>Reasoning: Fatigue, dyspnea during ambulation, tachycardia</p> <p>Goal: Pt. will perform ADL's w/ minimal dyspnea by the end of my TOC.</p> <p>Goal: HR and RR will return back to baseline within 3 minutes of activity cessation by the end of my TOC.</p>	<p>Assess baseline vitals (esp. PR, HR, BP, SpO₂) before activity and q4hr.</p> <p>Assess patient's gait and level of exertion during activity, assess any use of accessory muscles or SOB prn.</p> <p>Assess patient's emotional response to activity, before, during, and after (fear, anxiety, frustration) prn.</p> <p>Assess patient's sleep habits and ask about any fatigue or restlessness q8hr.</p> <p>Assess nutritional status and body weight. Monitor I's & O's.</p> <p>Assess muscle strength and tone for any weakness.</p>	<p>Monitor vitals during & after activity, stop activity if significant changes occur or SpO₂ < 90.</p> <p>Educate pt. to verbalize dizziness, SOB, lightheadedness during activity. After activity position patient in high-fowlers or tripod</p> <p>Reassure patient using therapeutic communication techniques to reduce anxiety and prevent dyspnea.</p> <p>Cluster care and allow for rest in between activity, reposition for comfort (give more pillows) and dim lights.</p> <p>Encourage small, frequent, high-protein meals to support energy needs and muscle strength.</p>

C&P: (N101 - Foundations of Nursing) (Course Planning 2025) (Course Documents) (Clinical) (N101 Nursing Problem Worksheet - 2025)